



EMPLOYMENT APPLICATION

OFFICE OF HUMAN RESOURCES

101 Monroe Street, 7th Floor, Rockville, Maryland 20850

(240) 777-5000 - TTY: (240) 777-5126

Online submissions preferred at www.montgomerycountymd.gov



It is the policy and practice of Montgomery County to select new employees and to promote current employees based on qualifications only, without regard to race, religion, color, national origin, sex, marital status, age, sexual orientation, disability or any other protected categories as defined by law. Each applicant appointed to a merit system position must meet all the requirements of that position. Such requirements may include successful completion of a verbal or written examination, a medical examination, and a confidential investigation, as well as the submission of certain documents.

Position Desired: **Fire Fighter/Rescuer I (Recruit)**

Requisition Number: **1583**

I. Personal Data

LName _____ FName _____ MName _____ Other _____

Address _____

City, State, Zip Code _____

Primary Phone (_____) _____ Secondary Phone (_____) _____

Email _____

II. General Information - All Applicants

How did you hear about us?

Career Fair ☐ County Employee ☐ Employee Bulletin ☐ Internet ☐ Job Recording ☐

Newspaper/Magazine/Journal ☐ Poster ☐ Other ☐ _____

Veterans Preference: Montgomery County reserves the right to require and/or obtain the complete verification of all information and the right to the final determination of eligibility for veteran's credit. Prior to appointment to a Merit system position, eligible veterans will be required to submit a copy of Form DD 214 for verification of military discharge information.

Are you claiming veteran's preference? Yes ☐ No ☐ (If yes, you must answer the questions below)

Have you been a resident of the State of Maryland for at least five (5) consecutive years preceding the date of your application for employment? Yes ☐ No ☐

Were you honorably discharged from any branch of the US armed service after serving at least one hundred and eighty (180) days of active duty? Yes ☐ No ☐

Were you separated from active duty in any branch of the US armed services within five (5) years preceding the date of your application for employment? Yes ☐ No ☐

Were you separated from active duty in any branch of the US armed services as a function of normal military retirement procedures? Yes ☐ No ☐

Were you previously appointed to a Merit System position with Montgomery County Government based on priority consideration as an eligible veteran? Yes ☐ No ☐

III. Position Specific Information:

Do you possess a valid motor vehicle operator's license? Yes ☐ No ☐

Regular: Yes ☐ No ☐

Commercial Driver's License: Yes ☐ No ☐

License Number: _____ State Issued: _____ Expiration Date: _____

Are you a U.S. Citizen? Yes ☐ No ☐ Are you a Resident Alien? Yes ☐ No ☐ Date of Birth: _____

Do you have a license or certification in any skilled labor or trades areas such as Carpentry, Plumbing, Electrical, Mechanical, HVAC? Yes ☐ No ☐ (If yes, please list the licenses/certifications)

Do you have any other abilities, skills or training that would be useful in this job?

Have you ever served in the military? Yes ☐ No ☐ (If yes, what branch?)

Have you ever received a dishonorable discharge from any branch of the military? Yes ☐ No ☐

Are you fluent in a language other than English? Yes ☐ No ☐ (If yes, please list all the languages you can read, write or converse in. Compensation for use of language skills requires department authorization and satisfactory completion of a fluency examination).

VI. Educational Information

High School Diploma or GED ☐ College-Freshman Year ☐ 60 Credit hrs or 90 qtr. hrs ☐
Associates Degree or College-Sophomore Year ☐ College-Junior Year ☐ Bachelor's Degree ☐
Post Bachelor's Studies ☐ Masters Degree ☐ Post Masters Studies ☐ Doctorate (PhD, MD, JD, etc.) ☐

Major: _____ Degree: Yes ☐ No ☐ Date awarded: _____ Credits: _____

V. Certification and Licensure Information (Please attach a copy of your certifications)

Do you possess any of the following:

Are you a certified Emergency Medical Technician - Basic (EMT-B)? Yes ☐ No ☐ Exp. Date: _____

Are you a Nationally Registered Emergency Medical Technician - Intermediate (NREMT-I)? Yes ☐ No ☐ Exp. Date: _____

Are you a Nationally Registered Emergency Medical Technician - Paramedic (NREMT-P)? Yes ☐ No ☐ Exp. Date: _____

Are you an Emergency Medical Technician - Paramedic (EMT-P)? Yes ☐ No ☐ What State? _____ Exp. Date: _____

Are you currently enrolled in NREMT-P? Yes ☐ No ☐ Expected completion date?: _____

Are you currently enrolled in NREMT-I? Yes ☐ No ☐ Expected completion date?: _____

Are you now or have you ever worked as a volunteer Fire Fighter/Rescuer? Yes ☐ No ☐ What State?: _____

Are you now or have you ever been employed as a paid Fire Fighter/Rescuer? Yes ☐ No ☐

Are you a certified Emergency Telecommunicator? Yes ☐ No ☐ What State?: _____

Are you currently a Correctional Officer, Law Enforcement Officer, Volunteer or Fire Fighter/Rescuer in another jurisdiction?
Yes ☐ No ☐

VI. Complete Work History: (Start with your present or most recent position. Indicate full time, part time, paid or unpaid)

Employer Name: _____ Dates of Employment: _____

Address: _____ Phone Number: (____) _____

Reason for Leaving: _____ Salary: _____

Job Title and Duties: _____

Name and Title of Supervisor _____

Employer Name: _____ Dates of Employment: _____

Address: _____ Phone Number: (____) _____

Reason for Leaving: _____ Salary: _____

Job Title and Duties: _____

Name and Title of Supervisor _____

Employer Name: _____ Dates of Employment: _____

Address: _____ Phone Number: (____) _____

Reason for Leaving: _____ Salary: _____

Job Title and Duties: _____

Name and Title of Supervisor _____

Employer Name: _____ Dates of Employment: _____

Address: _____ Phone Number: (____) _____

Reason for Leaving: _____ Salary: _____

Job Title and Duties: _____

Name and Title of Supervisor _____

General Information: (Affirmative answers to the following questions will not automatically exclude you from employment consideration.)

Have you ever been dismissed or asked to resign from any position? Yes ☐ No ☐ If yes, please explain: _____

Have you ever been convicted of an offense in an adult court? Yes ☐ No ☐ If yes, please explain. _____

The Office of Human Resources must receive all applications on or before the closing date. In order to avoid a delay in the processing of your application, please be sure you have signed the form below and that you have answered every question clearly and completely. All mailed applications must be postmarked no later than the closing date of the announcement.

I, the undersigned, certify that I have read and fully comprehend this form in its entirety and that the information herein provided is true and complete to the best of my knowledge. I understand that, if any statement I have made proves to be false, misleading or erroneous, it may result in the rejection of my application or in my discharge from County service. In submitting this application, I further understand that it becomes the property of Montgomery County and will not be returned.

Note: All Applicants must acknowledge the notice above, by signature on the following line. Failure to sign may result in rejection of this application.

Signature of Applicant: _____ Date Signed: _____

Optional EEO Information (As part of our EEO & Diversity Management Program, we are required to maintain workforce statistics by race/ethnicity and gender. Submission of this information is voluntary and is kept confidential. EEO information will not be used for consideration in the selection process.)

Race Category: American Indian or Alaska Native ☐ Asian/Pacific Islander ☐ Black ☐ Hispanic ☐ White ☐

Gender: Male ☐ Female ☐